FEC FORM 3X

Only

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines American College of Surgeons Professional Association PAC 1640 Wisconsin Ave NW ADDRESS (number and street) Check if different than previously DC 20007 Washington reported. (ACC) FEC IDENTIFICATION NUMBER STATE. CITY A ZIPCODE A IS THIS **AMENDED** NEW C00382424 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: Termination Report (TER) in the Election on State of 0 1 2005 30 2005 1 1 11 Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Ms. Cynthia Brown Type or Print Name of Treasurer Electronically Filed by Ms. Cynthia Brown 06 27 2006 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 02/2003)

SUMMARY PAGE

Page 2

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name American College of Surgeons Professional Association PAC [®] D ^UD 0 1 2005 1,1 3 0 2005 1.1 Report Covering the Period: From: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand [°]2005 38412.62 January 1 (b) Cash on Hand at 66519.49 Begining of Reporting Period 25547.00 365799.00 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 92066.49 404211.62 6(a) and 6(c) for Column B) 35265.12 347410.25 7. Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 56801.37 56801.37 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) This Committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission

999 E street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003) Page 3

Write or Type Committee Name

American College of Surgeons Professional Association PAC

Report Covering the Period:

From:

D D 1

2005

. 1 1

^D 3 0

^Y 2005

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11.	Contributions (other than loans) From: (a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	18600.00	293516.00
	(ii) Unitemized	3300.00	68636.00
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	21900.00	362152.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	21900.00	362152.00
2.	Transfers From Affiliated/Other Party Committees	0.00	0.00
3.	All Loans Received	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
16	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00
Ο.	to Federal candidates and Other Political Committees	0.00	0.00
7.	Other Federal Receipts (Dividends, Interest, etc.)	3647.00	3647.00
8.	Transfers from Non-Federal and Levin Funds		
	(a) Non-Federal Account (from Schedule H3)	0.00	0.00
	(b) Levin Funds (from Schedule H5)	0.00	0.00
	(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	25547.00	365799.00
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)	25547.00	365799.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: (a) Shared Federal/Non-Federal		
	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share	0.00	0.00
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating Expenditures	13765.12	68735.25
	(c) Total Operating Expenditures	13765.12	68735.25
,	(add 21(a)(i), (a)(ii) and (b))	13703.12	08733.23
	Committees	0.00	0.00
3.	Contributions to Federal Candidates/Committeesand Other Political Committees	21500.00	274250.00
١.	Independent Expenditure (use Schedule E)	0.00	0.00
	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
		0.00	0.00
ο.	Loan Repayments Made	0.00	0.00
	Loans Made	0.00	0.00
	(a) Individuals/Persons Other Than Political Committees	0.00	4425.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) Total Contribution Refunds	0.00	4425.00
	(add Lines 28(a), (b), and (c))		0 0 0 0 0 0 0 0
€.	Other Disbursements	0.00	0.00
).	Federal Election Activity (2 U.S.C 431(20))		
	(a) Shared Federal Election Activity (from Schedule H6)		
	(i) Federal Share	0.00	0.00
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	35265.12	347410.25
2.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) from Line 30(a)(ii)	35265.12	347410.25
	from Line 31)	30200.12	347410.23

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	21900.00	362152.00
34. Total Contribution Refunds (from Line 28(d))	0.00	4425.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	21900.00	357727.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	13765.12	68735.25
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	13765.12	68735.25

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 27 (check only one) X 11a 11b 11c 12 15 16 17
Ar	ny information copied from such Reports and St for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements may name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
/	American College of Surgeons Profess	onal Assoc	ciation PAC	
Α.	Full Name (Last, First, Middle Initial) Herand Abcarian			Date of Receipt
	Mailing Address 840 S Wood Street M/C 958			11 03 2005
	City Chicago	State IL	Zip Code 60612-7317	Transaction ID: 73007-31309145689010 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Self Employed	Occupation Surgeon	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
В.	Full Name (Last, First, Middle Initial) David Adams			Date of Receipt
	Mailing Address PO Box 250327 Medical University of So	11 09 2005		
	City	State	Zip Code	Transaction ID: 19372-10233706235885
	Charleston FEC ID number of contributing federal political committee.	SC	29425-0327	Amount of Each Receipt this Period 500.00
	Name of Employer Medical University of South Carolina Receipt For: Primary Other (specify)	Occupation Surgeon Aggregate	e Year-to-Date ▼ 500.00	1
	Full Name (Last, First, Middle Initial)	0 0	0 0 0 0 0 0 0	1
C.	Arthur Barnaby Mailing Address 2701 Holme Avenue Suite 104			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 39702-10480898618698
	Philadelphia F50 ID and the contribution	PA	19152-2029	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Self Employed	Occupation Surgeon	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
s	UBTOTAL of Receipts This Page (optional)			1500.00
Т	OTAL This Period (last page this line number of	ınlv)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 27 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Surgeons Profess	name and add	dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Kevin Bethke Mailing Address 676 N Saint Clair Stree Suite 1525 City Chicago FEC ID number of contributing federal political committee. Name of Employer Self Employed Receipt For: Primary General Other (specify)	State IL C Occupation Surgeon	Zip Code 60611-2927 n e Year-to-Date ▼	Date of Receipt M M O 9 2 0 0 5
Full Name (Last, First, Middle Initial) Marilu Bintz Mailing Address 610 E Taylor Street City Prairie Du Chien FEC ID number of contributing federal political committee. Name of Employer Gunderson Lutheran Receipt For: Primary General Other (specify)	State WI C Occupation Surgeon Aggregate	Zip Code 53821-2109 n e Year-to-Date ▼	Date of Receipt M M D D 2 0 0 5 Transaction ID: 19372-60818117856979 Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) John Bivona Mailing Address 275 North Street City Newburgh FEC ID number of contributing federal political committee. Name of Employer Self Employed Receipt For: Primary General Other (specify)	State NY C Occupatio Surgeon Aggregate	Zip Code 12550-3143 n e Year-to-Date ▼	Date of Receipt M
SUBTOTAL of Receipts This Page (optional))	1250.00
TOTAL This Period (last page this line number	only)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 27 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any or f	r information copied from such Reports and Sta or commercial purposes, other than using the n	tements may ame and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
١.	NAME OF COMMITTEE (In Full) American College of Surgeons Profession	onal Assoc	iation PAC	
A.	Full Name (Last, First, Middle Initial) Samuel Britt Mailing Address 3001 N Elm Street City Lumberton FEC ID number of contributing federal political committee. Name of Employer Lumberton Surgical CLinic Receipt For: Primary General Other (specify)	State NC C Occupation Surgeon Aggregate	Zip Code 28358-2984 n e Year-to-Date ▼	Date of Receipt M
3. 	Full Name (Last, First, Middle Initial) David Deets Mailing Address 215 E 1st Street Commerce Towers Suite City Dixon FEC ID number of contributing federal political committee. Name of Employer Self Employed Receipt For: Primary General Other (specify)	State IL C Occupation Surgeon	Zip Code 61021-3166	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
C. 1	Full Name (Last, First, Middle Initial) William Ford Mailing Address 901 Burnett Drive City Mountain Home FEC ID number of contributing federal political committee. Name of Employer Self Employed Receipt For: Primary General Other (specify)	State AR C Occupation Surgeon Aggregate	Zip Code 72653-2908 n e Year-to-Date ▼	Date of Receipt M
SU	JBTOTAL of Receipts This Page (optional)			2000.00
TC	OTAL This Period (last page this line number or	nlv)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12
Any information copied from such Reports and S	Statements may	y not be sold or used by any perso	n for the purpose of soliciting contributions
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Surgeons Profes			solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Thomas Frazier Mailing Address 101 S Bryn Mawr Average Suite 201 City Bryn Mawr FEC ID number of contributing federal political committee. Name of Employer Self Employed	State PA C Occupatio Surgeon	Zip Code 19010-3120	Date of Receipt M M
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Michael Gordon Mailing Address 136 Carbonton Road Mid Carolina Surgery City Sanford FEC ID number of contributing federal political committee. Name of Employer Mid Carolina Surgery Receipt For: Primary General Other (specify)	State NC C Occupatio Surgeon Aggregate	Zip Code 27330-4000 n e Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Baiba Grube Mailing Address 2200 Santa Monica Boyen Cancer In City Santa Monica FEC ID number of contributing federal political committee. Name of Employer John Wayne Cancer Institute Receipt For: Primary General Other (specify)	nstitute State CA C Occupatio Surgeon	Zip Code 90404-2302 In e Year-to-Date ▼ 250.00	Date of Receipt M
SUBTOTAL of Receipts This Page (optional)			500.00
TOTAL This Period (last nage this line number	only)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 10 / 27
	EMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may	y not be sold or used by any perso	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) American College of Surgeons Professi			
۸.	Full Name (Last, First, Middle Initial) William Hoff Mailing Address 801 Ostrum Street St. Lukes Hospital, Divis	sion of Tr		Date of Receipt 1 1 3 0 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
	City Bethlehem	State PA	Zip Code 18015-1000	Transaction ID: 14197-92875307798386 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer St. Lukes Hospital	Occupation Surgeon		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
3.	Full Name (Last, First, Middle Initial) Scott Hundahl	Date of Receipt		
	Mailing Address 10535 Hospital Way Va Northern California F	11 09 2005		
	Mather	State CA	Zip Code 95655-4200	Transaction ID: 19372-30952090024948 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	93033-4200	500.00
	Name of Employer Northern CA Health System	Occupation Surgeon	n	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
— Э.	Full Name (Last, First, Middle Initial) James Hurley			Date of Receipt
	Mailing Address 757 Norland Avenue Suite 104			11
	City Chambersburg	State PA	Zip Code 17201-4230	Transaction ID: 14197-16231936216354 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer Self Employed	Occupation Surgeon		
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 250.00	
s	UBTOTAL of Receipts This Page (optional)			1000.00
T	OTAL This Period (last page this line number o	nly)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 27 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar	ny information copied from such Reports and St for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Surgeons Profess			on for the purpose of soliciting contributions solicit contributions from such committee.
<u>/</u> A.	Full Name (Last, First, Middle Initial) Jace Hyder Mailing Address 1431 Bluffview Street Suite 210 City Wichita FEC ID number of contributing federal political committee. Name of Employer Self Employed Receipt For: Primary General Other (specify)	State KS C	Zip Code 67218-3039	Date of Receipt M M D D Y Y Y Y Y Y Y Y
В.	Full Name (Last, First, Middle Initial) Lenworth Jacobs Mailing Address 80 Seymour Street Hartford Hospital City Hartford FEC ID number of contributing federal political committee. Name of Employer Hartford Hospital Receipt For: Primary General Other (specify)	State CT C Occupatio Surgeon Aggregate	Zip Code 06102-8000 n e Year-to-Date ▼	Date of Receipt M
C.	Full Name (Last, First, Middle Initial) David Johnson Mailing Address 6641 E Baywood Avenuate B-3 City Mesa FEC ID number of contributing federal political committee. Name of Employer Self Employed Receipt For: Primary General Other (specify)	State AZ C Occupatio Surgeon	Zip Code 85206-1723 n e Year-to-Date ▼	Date of Receipt M M D D 2 0 0 5
s	UBTOTAL of Receipts This Page (optional)			1500.00
т	OTAL This Period (last page this line number of	only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 27 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Surgeons Profes			on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) John Kispert Mailing Address 2424 S 90th Street Suite 508 City West Allis FEC ID number of contributing federal political committee. Name of Employer	State WI C Occupation Surgeon	Zip Code 53227-2455	Date of Receipt M
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) David Knierim Mailing Address 9300 Valley Childrens City Madera FEC ID number of contributing	State CA	Zip Code 93638-8761	Date of Receipt M M D D 2 0 0 5
Receipt For: Primary Other (specify)	Occupation Surgeon Aggregate	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) William Kraybill Mailing Address Elm and Carlton Stree Roswell Park Cancer I City Buffalo FEC ID number of contributing federal political committee. Name of Employer Surgical Oncologist Cancer Institute Receipt For: Primary General	nstitute, Der State NY C Occupatio Surgeon	Zip Code 14263-0001	Date of Receipt M
Other (specify) SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number		1000.00	1750.00

SCHEDULE A (FEC For ITEMIZED RECEIPTS	m 3X)	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 27 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Re or for commercial purposes, other that	oorts and Statements ma n using the name and ad	y not be sold or used by any pers dress of any political committee t	son for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Surgeon	ns Professional Assoc	ciation PAC	
Full Name (Last, First, Middle Initia George Lisehora Mailing Address 1380 Lusitan	,		Date of Receipt
Suite 614			11 17 2005
City Honolulu	State HI	Zip Code	Transaction ID: 39702-88514345884324
FEC ID number of contributing federal political committee.	C	96813-2449	Amount of Each Receipt this Period 500.00
Name of Employer Self Employed Receipt For: Primary General	Occupation Surgeon Aggregate	n e Year-to-Date ▼	
Other (specify) ▼ Full Name (Last, First, Middle Initia B. Scott Maizel	l le		Date of Receipt
Mailing Address 4021 Twilight	Grove Court		1 1 0 9 2 0 0 5
City	State	Zip Code	Transaction ID: 66888-47787111997604
Ellicott City	MD	21042-5011	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Self Employed Receipt For: Primary General Other (specify) ▼	Occupation Surgeon Aggregate		
Full Name (Last, First, Middle Initia C. Chinmay Majmundar	al)		Date of Receipt
Mailing Address 27 Foot Poin			11 03 7 9 9 9
City Columbia	State SC	Zip Code	Transaction ID: 73007-41619509458542
FEC ID number of contributing federal political committee.	C	29209-0846	Amount of Each Receipt this Period 250.00
Name of Employer Self Employed	Occupation Surgeon	n	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page	optional)		1000.00
TOTAL This Period (last page this li	ne number only)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 27 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar or	ny information copied from such Reports and State for commercial purposes, other than using the national NAME OF COMMITTEE (In Full)	ements may	y not be sold or used by any person dress of any political committee to	
\rangle	American College of Surgeons Profession	nal Assoc	siation PAC	
Α.	Full Name (Last, First, Middle Initial) Nolan Moore	Date of Receipt		
	Mailing Address 20 Glenlake Parkway No			11 09 2005
	City Atlanta	State GA	Zip Code 30328-3473	Transaction ID: 19372-34807986021042 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	00020 0470	250.00
	Name of Employer Self Employed			
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
В.	Full Name (Last, First, Middle Initial) Eric Munoz Mailing Address 121 Oak Ridge Avenue			Date of Receipt
				11 09 2005
	City Summit	State NJ	Zip Code 07901-4307	Transaction ID: 27827-01614016294479
	FEC ID number of contributing federal political committee.	C	0/901-4307	Amount of Each Receipt this Period 250.00
	Name of Employer Self Employed	Occupation Surgeon	n	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 250.00	
С.	Full Name (Last, First, Middle Initial) N. Radtke			Date of Receipt
	Mailing Address 240 Audubon Medical Pl	11 09 2005		
	City	State	Zip Code	Transaction ID: 19372-74287050962448
	Louisville FEC ID number of contributing federal political committee.	C	40217	Amount of Each Receipt this Period 1000.00
	Name of Employer Self Employed	Occupation Surgeon	n	_
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 1000.00	
s	UBTOTAL of Receipts This Page (optional)			1500.00
т	OTAL This Period (last page this line number on	lv)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 15 / 27
	EMIZED RECEIPTS		or each category of the Detailed Summary Page	(check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar or	y information copied from such Reports and Sta for commercial purposes, other than using the n	tements may	y not be sold or used by any perso	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) American College of Surgeons Profession			
۹.	Full Name (Last, First, Middle Initial) Joseph Rube Mailing Address 1445 Portland Avenue Suite 307 City	State	Zip Code	Date of Receipt M M D D Y Y Y Y Y Y Y Y
	Rochester	NY	14621-3036	Transaction ID: 73007-42354983091354 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		300.00
	Name of Employer Self Employed Receipt For: Primary General	Occupation Surgeon Aggregate	n e Year-to-Date ▼	
	Other (specify) Full Name (Last, First, Middle Initial)	0 0	300.00	
3.	Yusuf Silk Mailing Address 2231 Burdett Avenue Suite 130			Date of Receipt M
	City	State	Zip Code	Transaction ID: 19372-63750857114792
	Troy	NY	12180-2447	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer Self Employed	Occupation Surgeon		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
	Full Name (Last, First, Middle Initial) Kenneth Smith			Date of Receipt
	Mailing Address 7594 River Crest Drive			1 1 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Columbus	State GA	Zip Code 31904-2028	Transaction ID: 39702-31727236509323
	FEC ID number of contributing federal political committee.	C	31904-2020	Amount of Each Receipt this Period 500.00
	Name of Employer Self Employed	Occupation Surgeon	n	_
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	
s	UBTOTAL of Receipts This Page (optional)			1100.00
T	OTAL This Period (last page this line number or	าly))	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 27 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar	ny information copied from such Reports and Sta for commercial purposes, other than using the n NAME OF COMMITTEE (In Full)			on for the purpose of soliciting contributions solicit contributions from such committee.
<u>/</u> A.	American College of Surgeons Profession Full Name (Last, First, Middle Initial) Ronit Sugar Mailing Address 205 Newtown Road Suite 108 City Warminster FEC ID number of contributing federal political committee.	State PA	Zip Code 18974-5275	Date of Receipt M
	Name of Employer Self Employed Receipt For: Primary General Other (specify) ▼	Occupation Surgeon Aggregate	e Year-to-Date ▼ 500.00	
В.	Full Name (Last, First, Middle Initial) Richard Thirlby Mailing Address 1100 9th Avenue # 900 Mason Clinic, Departme City Seattle FEC ID number of contributing federal political committee. Name of Employer Virginia Mason Clinic Receipt For:	State WA C Occupation Surgeon	Zip Code 98101-2756	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
С.	Primary General Other (specify) Full Name (Last, First, Middle Initial) W. Lane Verlenden Mailing Address 950 Cass Street City	State	500.00 Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Monterey FEC ID number of contributing federal political committee.	CA	93940-4507	Amount of Each Receipt this Period 500.00
	Name of Employer Self Employed Receipt For: Primary General Other (specify)	Occupation Surgeon Aggregate	e Year-to-Date ▼ 500.00	
s	UBTOTAL of Receipts This Page (optional))	1500.00
Т	OTAL This Period (last page this line number o	nlv)		

IT	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 27 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Ar or	ly information copied from such Reports and Sta for commercial purposes, other than using the n	tements may ame and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\rangle	NAME OF COMMITTEE (In Full) American College of Surgeons Profession	onal Assoc	iation PAC	
۹.	Full Name (Last, First, Middle Initial) Robert Wald			Date of Receipt
	Mailing Address 100 E Valencia Mesa Dr Suite 300	ive		1 1 0 9 2 0 0 5
	City	State	Zip Code	Transaction ID: 66843-70418947935105
	Fullerton	CA	92835-3813	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Self Employed	Occupation Surgeon	n	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼		250.00	
3.	Full Name (Last, First, Middle Initial) William Ward			Date of Receipt
	Mailing Address 640 S Washington Stree Suite 350	et		11 03 7 2005
	City	State	Zip Code	Transaction ID: 73007-18522280454635
	Naperville	IL	60540-6603	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Surgical Practice Ltd	Occupation Surgeon	1	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
) .	Full Name (Last, First, Middle Initial) Gregory Weinstein			Date of Receipt
	Mailing Address 3400 Spruce Street Department Otol			11 09 2005
	City	State	Zip Code	Transaction ID: 19372-91840761899949
	Philadelphia	PA	19104-4206	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Self Employed	Occupation Surgeon	n	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
s	UBTOTAL of Receipts This Page (optional)			1000.00
			<u> </u>	-

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 18/2/ (check only one)
ITEMIZED RECEIPTS		or each category of the Detailed Summary Page	X 11a 11b 11c 12
		, ,	13 14 15 16 17
Any information copied from such Reports and Sta or for commercial purposes, other than using the n	atements may name and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
American College of Surgeons Profession	onal Assoc	iation PAC	_
Full Name (Last, First, Middle Initial) A. Anthony Whittemore			Date of Receipt
Mailing Address 75 Francis Street Brigham and Womens F	Hospital, Ch	nief	1 1 0 9 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 19372-67748659849167
Boston	MA	02115-6110	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Brigham and Womens Hospit- al	Occupation Surgeon	1	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	250.00	
Full Name (Last, First, Middle Initial) B. John Wilcher			Date of Receipt
Mailing Address 2661 Salem Avenue Suite 220			11 03 7 2005
City	State	Zip Code	Transaction ID: 73106-39426821470261
<u>Dayton</u>	OH	45406-2996	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Self Employed	Occupation	1	
Receipt For:	Surgeon	e Year-to-Date ▼	_
Primary General	Aggregate	: fear-to-Date ▼	
Other (specify) ▼	0 0	250.00	
Full Name (Last, First, Middle Initial) C. Wayne Wilson			Date of Receipt
Mailing Address 1970 Roanoke Boulevar Va Hospital	rd		11 09 2005
City	State	Zip Code	Transaction ID: 19372-43938845396042
Salem	VA	24153-6404	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		500.00
Name of Employer Va Hospital	Occupation Surgeon	1	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼	1 1	500.00	
SUBTOTAL of Receipts This Page (optional)			1000.00
TOTAL This Period (last page this line number of	alv)		

Receipt For:

Primary

Other (specify)

General

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

PAGE 19/27 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the 11a 11b 11c **Detailed Summary Page** 13 14 16 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American College of Surgeons Professional Association PAC Full Name (Last, First, Middle Initial) David Wisner Date of Receipt Mailing Address 2315 Stockton Boulevard 1.1 17 2005 Uc Davis Medical Center, Room 4209 City State Zip Code Transaction ID: 39826-62560671567917 Sacramento CA 95817-2201 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 C federal political committee. Name of Employer University of California Occupation Surgeon Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Michael Zenilman Date of Receipt Mailing Address 450 Clarkson Avenue # 40 2005 03 Suny Downstate Medical Center, Dep City State Zip Code Transaction ID: 73007-25651186704635 Brooklyn NY 11203-2056 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Name of Employer SUNY Occupation Surgeon

Aggregate Year-to-Date ▼

1000.00

SUBTOTAL of Receipts This Page (optional)	•	2000.00
TOTAL This Period (last page this line number only)	•	18600.00

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SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS Any information copied from such Reports and State or for commercial purposes, other than using the national forms.		
NAME OF COMMITTEE (In Full) American College of Surgeons Profession	nal Association PAC	
Full Name (Last, First, Middle Initial) American College of Surgeons Mailing Address 1640 Wisconsin Ave, NV	V	Date of Receipt 1 1 1 5 2 0 0 5
City	State Zip Code	Transaction ID: 26549-67402285337448
Washington FEC ID number of contributing federal political committee. Name of Employer	DC 20007 C Occupation	Amount of Each Receipt this Period 3647.00
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 3647.00	Dues money deposited into PAC in error. Funds are transferred to the ACSPA account on 3/1/06.

SUBTOTAL of Receipts This Page (optional)	•	3647.00
TOTAL This Period (last page this line number only)	•	3647.00

SCIEDOLL B (I LCI OIIII 3X)	Use seperate schedule(s)			E NUMBE nly one)	:K:		L P	AGE	21 / 2/	<u>'</u>
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X	21b 27	22 28a	\Box	23 28b	24 28c	\vdash	25 29	26 30b
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam										
or for commercial purposes, other than using the nam NAME OF COMMITTEE (In Full)	e and address of any political co		ee 10 S	UIIUIL CONT	IIDUIIC	JIIS ITO	ın such	COHIMI	ııee	
American College of Surgeons Profession	al Association PAC									
Full Name (Last, First, Middle Initial)				Trans	sactio	on ID:	V11848	3-140	63662	229057
American Express						burse				
Mailing Address PO BOX 53582				1 1	M /	^D 0	^D /	, Ž () Ď 5 `	
City	State Zip Code			Amou	ınt of	Each	Disburs	ement	this Pe	eriod
Phoenix Purpose of Disbursement	AZ 85072							1	72.12	2
Fee to use Amex as a contribution source		00	1		-			-		
Candidate Name		Categ Typ	-							
Senate President	ement For: Primary General Other (specify)									
State: District:										
Full Name (Last, First, Middle Initial) National Capital Teleserv						sburse				_
Mailing Address 300 Fifth Street, NE						^D 0	2 /	ž () Ó 5 `	
City Washington	State Zip Code DC 20002			Amou	ınt of	Each	Disburs			-
Purpose of Disbursement Fee for PAC telemarketing	1	00:			-			40	05.64	4
Candidate Name		00 Categ	ory/							
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)									
Full Name (Last, First, Middle Initial) National Capital Teleserv							V26992	2-237	34682	279838
- National Capital Teleselv				M	M /	sburse		Y Y	Υ _ \	7
Mailing Address 300 Fifth Street, NE				1 1		^D 0) Ď 5 `	
City Washington	State Zip Code DC 20002			Amou	ınt of	Each	Disburse	ement	this Pe	eriod
Purpose of Disbursement Fee for PAC telemarketing		00	1	Ţ L.				38	888.78	3
Candidate Name		Categ Typ	ory/							
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)									
SUBTOTAL of Disbursements This Page (optional)			•		•			80	66.54	1
TOTAL This Desired (last case this Personal L.)										
TOTAL This Period (last page this line number only)			•							

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S	CHEDULE B (FEC Form 3X)						NUMBE	R:		P	PAGE 22/27					
IT	EMIZED DISBURSEMENTS	for each	check	_	- '	_	-		_							
		Detailed	Summary Page		_	`	22	_	23	24	\perp	25	26			
_	16 5 16 10 10				27	Ļ	28a	\perp	28b	28c	ᆣ	29	30b			
	ly Information copied from such Reports and Statem for commercial purposes, other than using the name												ns			
\setminus	NAME OF COMMITTEE (In Full)															
$ \rangle$	American College of Surgeons Professiona	al Associa	tion PAC													
	Full Name (Last, First, Middle Initial)						Trans	sactio	n ID:	V3970	2-58	7612	3309135			
Α.	National Capital Teleserv								burse							
	Mailing Address 300 Fifth Street, NE							M /	^D 2	1 /	2	o ŏ	5 ^Y			
	City Washington	State DC	Zip Code 20002				Amou	ınt of	Each I	Disburs	emer	nt this	Period			
	Purpose of Disbursement Fee for PAC Telemarketing			Ō	01	1						5270.	03			
	Candidate Name				egory/ /pe											
	Office Sought: House Disburse Senate President	ement For: Primary Other (spe	General ecify) ▼													
	State: District:															
В.	Full Name (Last, First, Middle Initial) Oak Brook Bank								n ID:		3-27	9720	4852104			
	Mailing Address 1400 16th Street							M /	0	3 /	Y 2	o ŏ	5 ^Y			
	City Oak Brook	State IL	Zip Code 60521				Amou	ınt of	Each	Disburse	emer	-				
	Purpose of Disbursement Fee to use MC/Visa as a contribution sou					1	L.					428.	55			
	Candidate Name Categor Type															
	Office Sought: House Disburse Senate President	ement For: Primary Other (spe	General													

SUBTOTAL of Disbursements This Page (optional)	<u> </u>	5698.58
TOTAL This Period (last page this line number only)	•	13765.12

District:

State:

TEMPED DISCUSSION	Use seperate schedule(s)		check or	e NOMBER. PAGE 237							
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 27	<u></u>	´ —	23 28b	24 28c	П	25 29	\Box	26 30b
Any Information copied from such Reports and State											
or for commercial purposes, other than using the na	me and address of any political co	ommi	ttee to s	olicit d	ontribu	itions fro	om such o	comm	ittee		
NAME OF COMMITTEE (In Full)											
American College of Surgeons Professio	nal Association PAC										
Full Name (Last, First, Middle Initial)				Tı	ansac	tion ID:	26992-	0431	9399	595	 26
Committee To Re-Elect Bobby Jindal				D	ate of [Disburse		v • v	· V	V	
Mailing Address PO Box 8628					1"1 "	0	7 /	2	0 Ď 5		
City Metairie	State Zip Code LA 70011			А	mount	of Each	Disburse	ement	this P	erio	t
Purpose of Disbursement	LA 70011			- [20	0.00	0	7
2006 Primary		01	11	-				-			_
Candidate Name Bobby Jindal	(Cate Ty	gory/								
	sement For: 2006	٠ ١	PC								
	X Primary General										
President Districts 04	Other (specify)										
State: LA District: 01 Full Name (Last, First, Middle Initial)											—
Full Name (Last, First, Middle Illitial) Fingel for Congress						t ion ID: Disburse	19372- ement	1912	80543	380	41
				1	M M		5 /	YY	0 ŏ 5	Υ	
Mailing Address 462 California Road				L	1 1	!	5	2	005		
City Bronxville	State Zip Code NY 10708						Disburse	ement	this P	eriod	t
Purpose of Disbursement		_	-	1				10	0.000	0	
2006 Primary		Q1	11								
Candidate Name Eliot Engel		Cate Ty	gory/ pe								
0 1	sement For: 2006										
Senate President	X Primary General Other (specify) ▼										
State: NY District: 17	Other (specify)										
Full Name (Last, First, Middle Initial)				Т	ansac	tion ID:	45483-	6894	34230	132	76
Friends of Congressman Tim Holden						Disburse			0 120		, 0
Mailing Address 18 North Second Stree PO Box 37	PO Box 37				м м 1 1	0	2 /	ž	0 Ď 5	Υ	
City Saint Clair	State Zip Code PA 17970			A	mount	of Each	Disburse	ement	this P	erio	t
Purpose of Disbursement 2006 Primary	Г	0.1		1 L				2	500.0	0	
Candidate Name		01 Cate	gory/								
Tim Holden		Ty	· ,								
	sement For: 2006										
Senate President	X Primary General Other (specify) ▼										
State: PA District: 17	Strict (Specify)										
									.00.0		$\overline{}$
SUBTOTAL of Disbursements This Page (optional)			Ĺ				55	0.00	U	
TOTAL This Period (last page this line number on	v)		•								

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ľ	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	F	21b 27			23 28b	24 28c	П	25 29	П	26 30b	
	y Information copied from such Reports and Statem										<u>—</u>		
or	for commercial purposes, other than using the name	e and address of any political	comn	nittee to s	solicit	contrib	utions fr	om such o	comn	nittee			
	NAME OF COMMITTEE (In Full)												
/	American College of Surgeons Professiona	al Association PAC											
	Full Name (Last, First, Middle Initial)				-	Transa	tion ID:	45483-	9234	14301	939	01	
۸.	Friends of Dennis Cardoza					Date of	Disburs		· · ·	V	V		
	Mailing Address 555 Capitol Mall Suite 14	25				1"1 ""	J C	2 /	2	0 Ď 5			
	,	State Zip Code CA 95814				Amount	of Each	Disburse	emen	t this P	erio	d	
	Sacramento Purpose of Disbursement	OA 95614				_ ·			2	2500.0	0		
	2006 Primary)11									
	Candidate Name Dennis Cardoza			egory/ ype									
		ment For: 2006											
	Senate X President	Primary General Other (specify) ▼											
	State: CA District: 18	Carior (openity)											
	Full Name (Last, First, Middle Initial)				-	Fransac	ction ID:	19372-	0661	15847	349	16	
3.	Friends of Sam Johnson						Disburs	ement					
	Mailing Address 1611 Avenue K					1"1 "	1	5 /	2	0 Ď 5			
	City Plano	State Zip Code TX 75074				Amount	of Each	Disburse	emen	t this P	erio	d	
	Purpose of Disbursement	1007	_						2	500.0	0		
	2006 Primary)11									
	Candidate Name Sam Johnson			egory/ ype									
	· ·	ment For: 2006											
	Senate X President	Primary General Other (specify)											
	State: TX District: 03	Cirici (Speelity)											
_	Full Name (Last, First, Middle Initial)				-	Γransa	ction ID:	45483-	0376	57031	431	19	
J.	John Sullivan for Congress Inc					Date of	Disburs	ement	· · · · ·	V	V		
	Mailing Address Post Office Box 470840					1"1 "]	2 ′	2	0 Ď 5			
	City Tulsa	State Zip Code OK 74147				Amount	of Each	Disburse	emen	t this P	erio	d	
	Purpose of Disbursement 2006 Primary			011					. 1	000.0	00		
	Candidate Name			egory/									
	John Sullivan		Т	уре									
	·	ement For: 2006 Primary General											
	Senate X President	Other (specify)											
	State: OK District: 01												
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TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 27	22 28a	X 23 28b	24 28c	25 29	26 30b	
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or for commercial purposes, other than using the nam NAME OF COMMITTEE (In Full)	e and address of any political co	ווווווווווווווווווווווווווווווווווווווו	ee io s	UNCIL CONTR	เมนแบบร	HOIH SUCH	COMMINICE	-	
American College of Surgeons Profession	al Association PAC								
Full Name (Last, First, Middle Initial)				Trans	action II	D : 26992	-4744378	3924369	
Lincoln Davis for Congress					of Disbur		V	V	
Mailing Address PO Box 350				1 1	W / D	07	žoŏ	5	
City Jamestown	State Zip Code TN 38556			Amou	nt of Eac	ch Disburs	ement this	Period	
Purpose of Disbursement	Г			L			2500	0.00	
2006 Primary Candidate Name		01 ² Categ							
Lincoln Davis		Тур	-						
X X	ement For: 2006								
Senate X President	Primary General Other (specify) ▼								
State: TN District: 04									
Full Name (Last, First, Middle Initial)						D : 19870-	-4657403	3826713	
Mike Thompson for Congress				of Disbur		Y	Y		
Mailing Address 5429 Madison Avenue				1 1 1 D 1 5 V Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
City Sacramento	State Zip Code CA 95841			Amou	nt of Eac	ch Disburs	ement this	Period	
Purpose of Disbursement		-	-				1500	0.00	
2006 Primary Candidate Name		01							
Mike Thompson	'	Categ Typ	-						
X	ement For: 2006								
Senate X President	Primary General Other (specify) ▼								
State: CA District: 01									
Full Name (Last, First, Middle Initial) Peterson for Congress						D : 45483	1985437	7273979	
retersor for Congress					of Disbur	D /	Y Y Y	_ Y	
Mailing Address 26192 Floyd Lake Point	Road			11		01	žoŏ	5	
City Detroit Lakes	State Zip Code MN 56501			Amou	nt of Eac	ch Disburs	ement this	Period	
Purpose of Disbursement 2006 Primary	Γ	01		L.			2500	0.00	
Candidate Name Collin Peterson	-	Categ	ory/						
· -	ement For: 2006	712		1					
	Primary General								
State: MN District: 07	Other (specify)								
SURTOTAL of Dishursoments This Dags (actions)				<u> </u>			6500	.00	
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	y Information copied from such Reports and Statem			ny persor		he purp	ose of s	olicating o		butions	<u>Ш</u> ;	-
or	for commercial purposes, other than using the name	e and address of any politica	l comr	nittee to s	solicit	contrib	utions fr	om such	comr	nittee		
\	NAME OF COMMITTEE (In Full)											
/	American College of Surgeons Professiona	al Association PAC										
	Full Name (Last, First, Middle Initial)					Transa	ction ID:	26992-	946	51430	845	26
۹.	Rehberg for Congress					Date of	Disburs		v v	V .	V	
	Mailing Address PO Box 1597					1 1	C	7 /	2	0 0 5		
	City Helena	State Zip Code MT 59624				Amount	of Each	Disburse	emen	t this P	erio	d
	Purpose of Disbursement	39024							1	000.0	0	
	2006 Primary			011						-		
	Candidate Name Dennis Rehberg			tegory/ ype								
		ment For: 2006										
		Primary General										
	State: MT District: 01	Other (specify)										
	Full Name (Last, First, Middle Initial)				+.	-	ID	07445	0001	-0004	000	
3.	Rodney Alexander for Congress Inc.					Date of	Disburs					41
	Mailing Address PO Box 367 319 Nancy Road					1 1	/ DC	7 /	ž	0 Ď 5	Y	
	,	State Zip Code LA 71268				Amount	of Each	Disburse	emen	t this P	erio	d
	Purpose of Disbursement					L				500.0	0	
	2006 Primary)11								
	Candidate Name Rodney Alexander			egory/ ype								
	ů X	ment For: 2006										
		Primary General										
	President State: LA District: 05	Other (specify)										
	Full Name (Last, First, Middle Initial)				+.	Tuomaa	ation ID	00000	26.40	20471	060	
Э.	Shelley Moore Capito for Congress						Disburs		2048	33471	000	00
	Mailing Address PO Box 11519					1 1 M	/ DC	7 /	ž	0 Ď 5	Y	
	,	State Zip Code WV 25339				Amount	of Each	Disburse	emen	t this P	erio	d
	Purpose of Disbursement	23003							. 1	000.0	0	
	2006 Primary 011 Candidate Name Category/											
	Shelley Capito			egory/ ype								
	Office Sought: X House Disburse	ement For: 2006		71								
		Primary General										
	President Chata M// District 02	Other (specify)										
	State: WV District: 02											_
s	UBTOTAL of Disbursements This Page (optional)			▶					2	500.0	0	
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S	CHEDULE B (FEC Form 3X)	Use sepe	Use seperate schedule(s)		NUMBER:	PAGE 27 / 27					
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	y Information copied from such Reports and for commercial purposes, other than using the	•				ū					
$\overline{\ }$	NAME OF COMMITTEE (In Full)										
<u>/</u>	American College of Surgeons Profe	essional Associa	tion PAC								
	Full Name (Last, First, Middle Initial)				Transaction ID: 19	9372-1354181170463					
٩.	Wally Herger for Congress Committee	ee			Date of Disbursement						
	Mailing Address PO Box 1500				111 / 15	2005					
	City	State	Zip Code		Amount of Each Dis	sbursement this Period					
	Chico	CA	95927			1000.00					
	Purpose of Disbursement 2006 Primary		I	011		1000.00					
	Candidate Name Wally Herger			Category/ Type							
	Office Sought: X House Senate President	Disbursement For: X Primary Other (spe	2006 General								
	State: CA District: 02		•		l						

SUBTOTAL of Disbursements This Page (optional)	•	1000.00
TOTAL This Period (last page this line number only)	<u> </u>	21500.00